

**COUNTY OF LOS ANGELES - TREASURER AND TAX COLLECTOR
BUSINESS LICENSE INVESTIGATION REPORT**

Account# 141801

Application for
Theatre-General

Date
11/17/14

						Hearing Date
D.B.A. Malibu Twin Cinemas	Organization or Corporation Hollywood Theatres III, Inc.					Incorporation Date 12/22/10
Address of Proposed Activity 3822 Cross Creek Rd, Malibu 90265		Contacted Charles Roemer			Date Contacted 11/05/14	
Applicant, Sponsoring Adult or Corporate Officer 1. Charles Roemer		Position General Manager				Ever Arrested Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Address 2640 Lake Ave #H, Altadena, CA 91001	Hgt. 6'0"	Wgt. 210	Hair BROWN	Eyes HAZEL	DOB 06/18/85	Place of Birth Glendale
2. Amy Miles		Position President				Ever Arrested Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	Hgt.	Wgt.	Hair BROWN	Eyes BLUE	DOB	Place of Birth
3. Corey J. Coggin		Position Vice President				Ever Arrested Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	Hgt.	Wgt.	Hair BROWN	Eyes BROWN	DOB	Place of Birth
4. Gregory W. Dunn		Position Vice President				Ever Arrested Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	Hgt.	Wgt.	Hair BROWN	Eyes BROWN	DOB	Place of Birth
5.		Position				Ever Arrested Yes <input type="checkbox"/> No <input type="checkbox"/>
Address	Hgt.	Wgt.	Hair BROWN	Eyes BROWN	DOB	Place of Birth
Location <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased <input type="checkbox"/> Sub-Leased From Whom: Cross Creek Preservation Co.						
Termination Date of Lease 08/14/16	Immediate Vicinity Shopping & Restaurants		School or Churches Yes, both		Hearing Notice Posted	
Charitable Activity None	Proposed Date of Activity None	Age Group Any	Admission Charged Varies	Amount \$0	Security Guards Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> No. NA	
Estimated Attendance 42,000/year	Posted Capacity 192	Parking - Location Front of building	Number Shopping Center	Paved Yes	Lighting Adequate	
Outside Signs In front of the building and out front in the parking lot entrance					Interior Lightning Adequate	
Alcoholic Beverages Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Type ABC License N/A		ABC Licensed Issued To N/A		
Location Previously Licensed Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date 03/31/14		Applicant Previously Licensed Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date		License Suspended, Revoked, or Denied Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date		
Type Theatre General		Type N/A		Type N/A		
Date Started Operation 04/19/13	Billiard Tables Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Number N/A		State Board Number SR Z OHA 102-629359 00002 AC			
Attire Regal Uniform	Type of Food Served Popcorn, Nachos, Hot Dogs		Entertainment (Describe) N/A			
Hours of Operation 7 days a week	Days of Operation Mon - Fri 3:30pm - 10:30pm Sat - Sun 12:30pm - 10:30pm		County License Number 141801			

Description of Vehicles

Model

Vehicle License Number

County License Number

Year	Make			

Color Scheme and Insignia on vehicles

Schedule of Rates

Additional Information

O. Partida
Investigated By

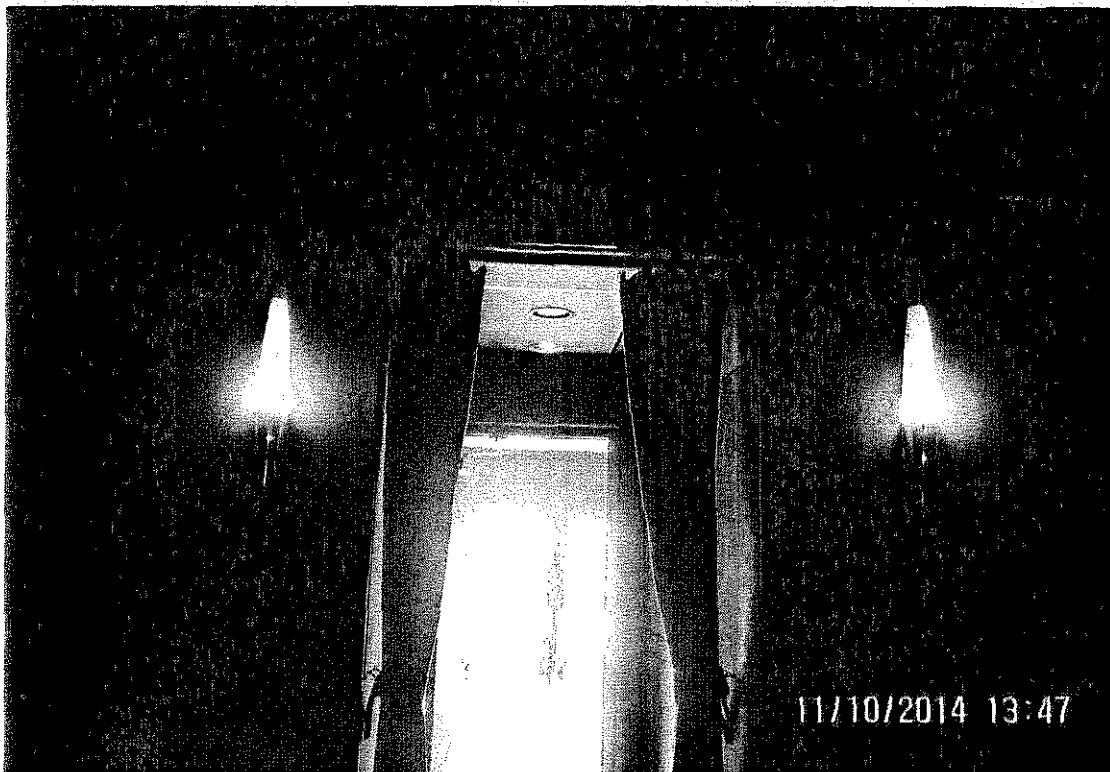
11/18/14
Date

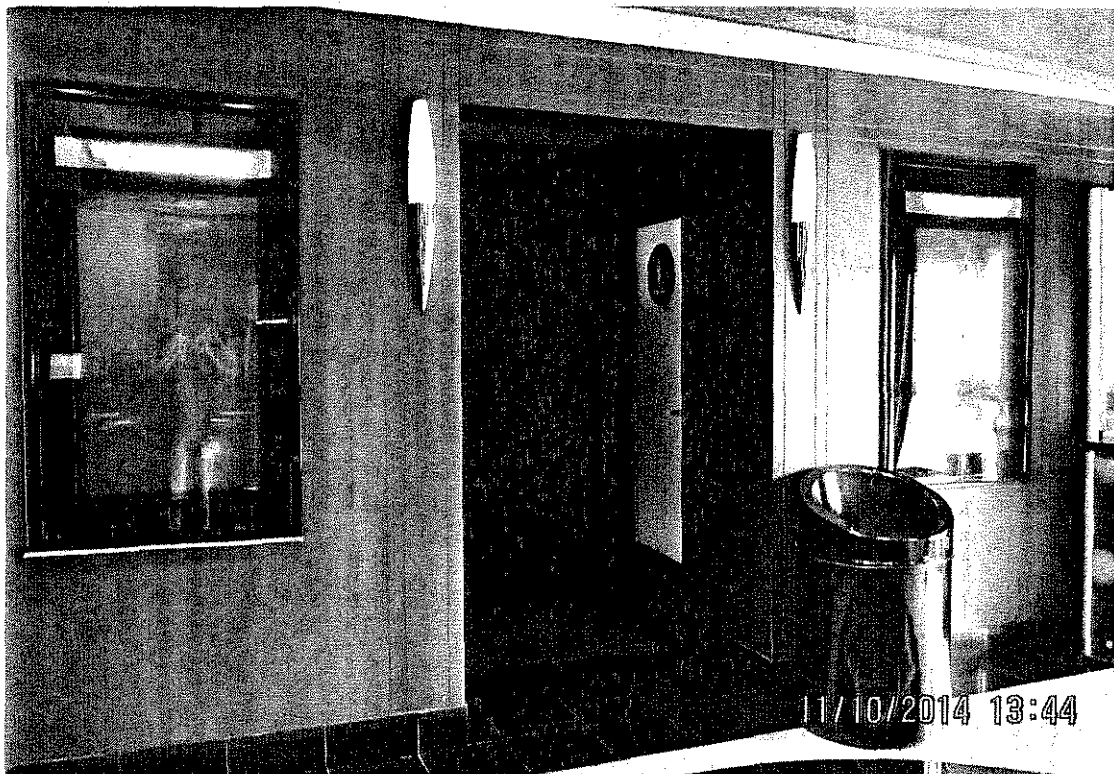
Reviewed By

Date



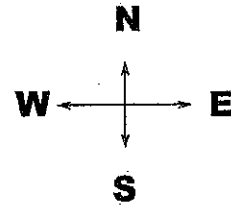




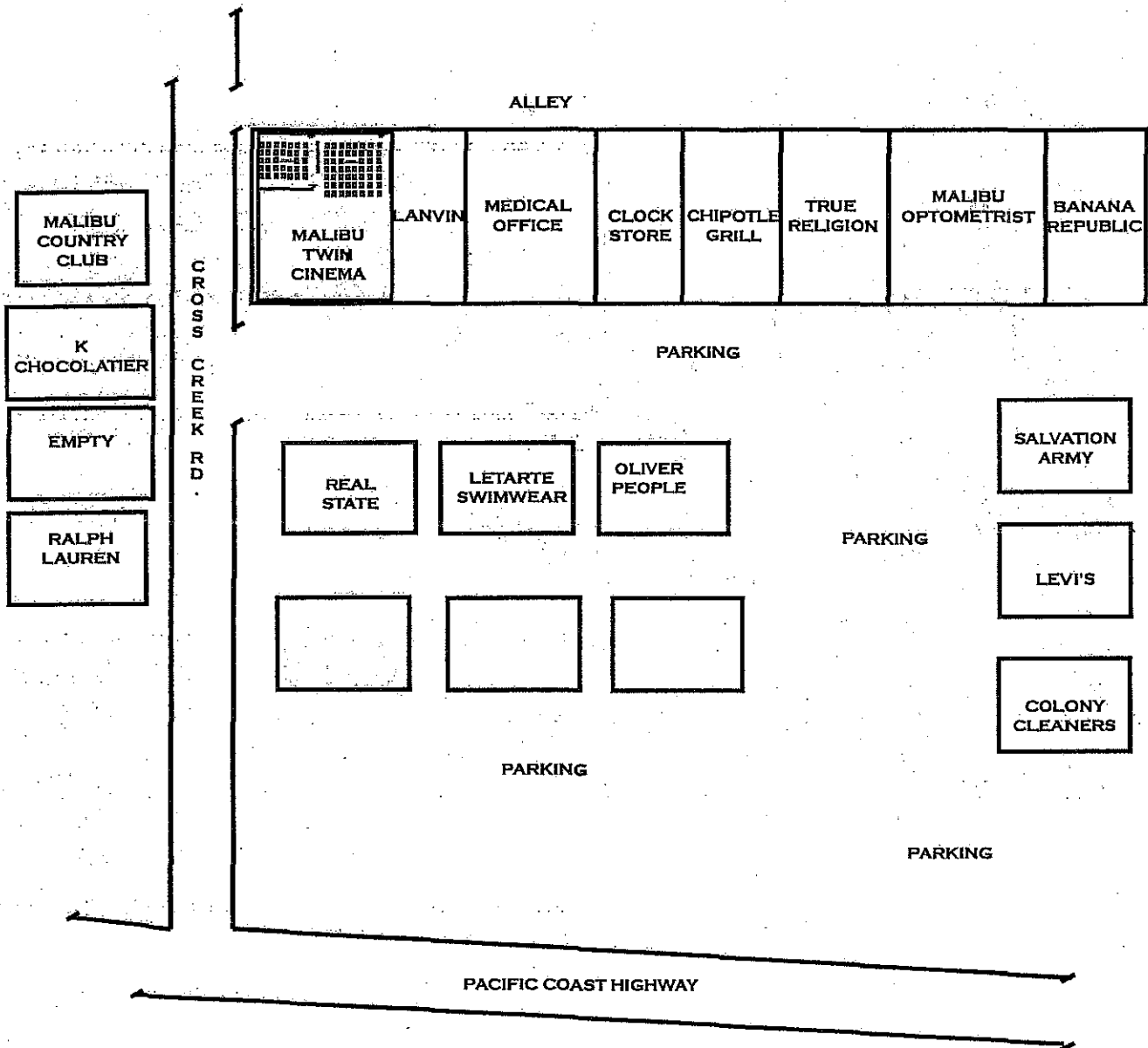




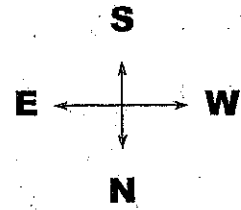
MALIBU TWIN CINEMAS
3922 CROSS CREEK RD.
MALIBU CA 90265
NOT DRAWN TO SCALE
BY: M. BEJARANO #2
DATE: 11-11-14



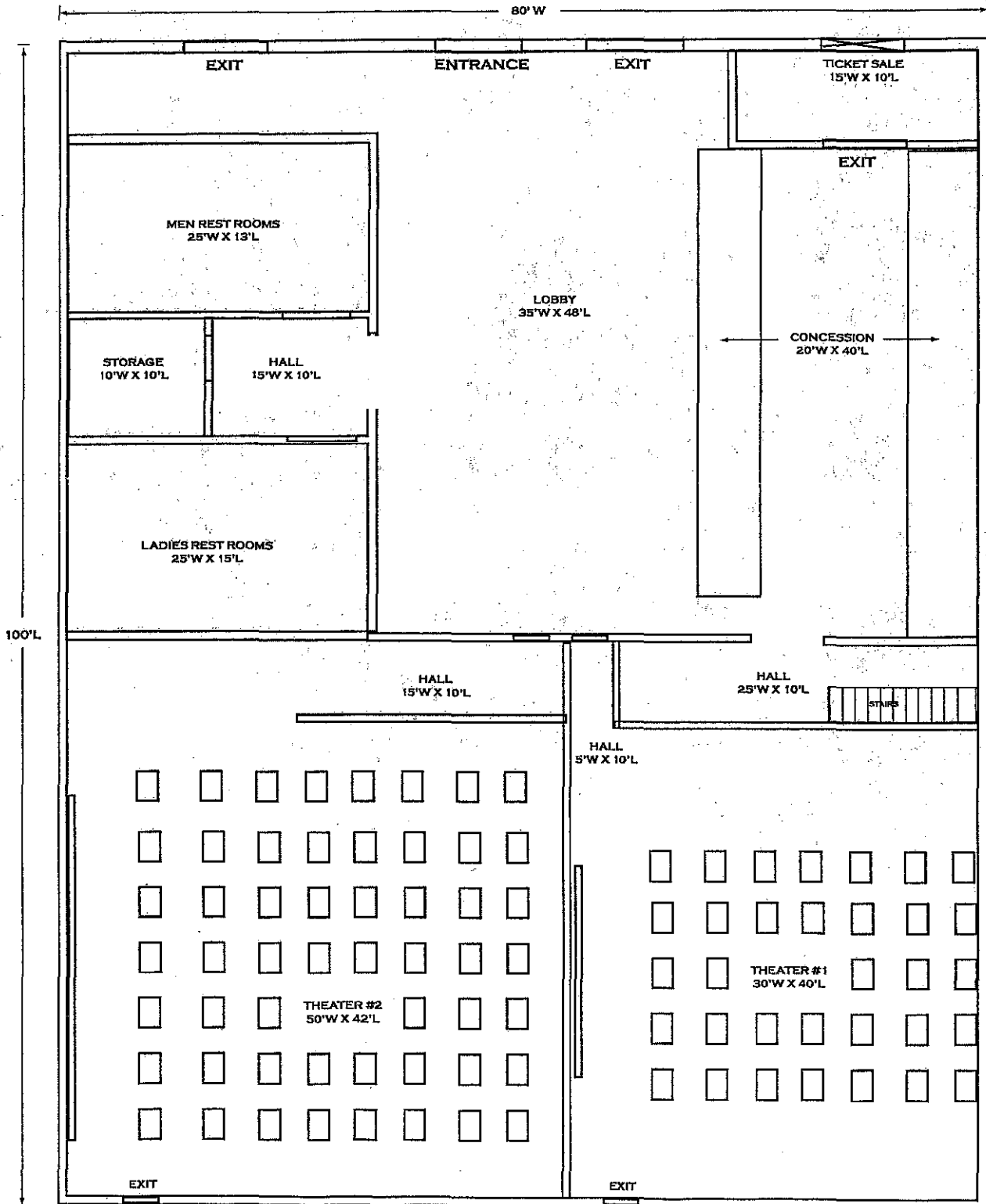
SITE PLAN



MALIBU TWIN CINEMAS
3922 CROSS CREEK RD.
MALIBU, CA 90265
NOT DRAWN TO SCALE
BY: M. BEJARANO #2
DATE: 11-11-14



INTERIOR FLOOR PLAN
FIRST LEVEL





Los Angeles County Treasurer and Tax Collector
Application for Business License



Please note: Business License fees are NOT refundable

P/E 1830.00
40.00
Fee: \$ 1870.00

ID # 141801

BUSINESS INFORMATION

Type of Business: Movie Theatre	Address of Business: 3822 Cross Creek Rd. Malibu, CA 90265	
DBA (Business Name): Malibu Twin Cinemas	Business Telephone: (310) 317-4531	
Sellers Permit # (State Board of Equalization): SRZ OHA 102-629359 00002 AC	Mailing Address: [REDACTED]	
Business Ownership Structure: Single Owner <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input checked="" type="checkbox"/>		
If LLC or Corporation, the information below is required:		
Date of Incorporation: 12-22-2010	Incorporated in the State of: Florida	
Exact Corporate Name: Hollywood Theaters III, Inc		
Names of Officers	Addresses	Titles
Amy C. Miles	[REDACTED]	President
Gregory W. Dunn	[REDACTED]	Vice President
Peter B. Brandow	[REDACTED]	VP / Secretary
Corey J. Coggin	[REDACTED]	VP / Asst. Treasurer

APPLICANT INFORMATION

Applicant's Full Name: CHARLES LELAND ROEMER THEATRE MANAGER		
Home Address: [REDACTED]		
Home Telephone: [REDACTED]	Cell Phone: [REDACTED]	Email address: CHARLESROEMER@GMAIL.COM
Social Security #: [REDACTED]	Date of Birth: [REDACTED]	Place of Birth: [REDACTED]
Driver's License or State ID#: [REDACTED]		Expiration Date: [REDACTED]
Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Height: [REDACTED]	Weight: [REDACTED]
Hair Color: [REDACTED]		Eye Color: [REDACTED]

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the Business License applied for, I agree to submit any additional information that may be required, to conduct all phases of this Business License in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances and regulations.

Date: 10-15-14 Applicant's Signature: [Signature]

Application taken by: MG Date: 10-23-14

* If you suspect fraud or wrongdoing by a County of Los Angeles employee, report it to the fraud hotline at 1(800) 544-6861



**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL
SUMMARY SHEET**

KIND OF BUSINESS: **THEATER-GENERAL**

ADDRESS OF BUSINESS: **3822 CROSS CREEK RD, MALIBU, CA 90265**

TELEPHONE: **(310) 317-4531**

OWNER OF BUSINESS: **CHARLES L ROEMER**

CAL. DR. LIC.#: [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **MALIBU TWIN CINEMAS**

MAILING ADDRESS: [REDACTED]

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input type="checkbox"/> 2. Risk Management			
<input checked="" type="checkbox"/> 3. Building & Safety	YES	03/01/16	tchen
<input checked="" type="checkbox"/> 4. Fire Department	YES	11/26/14	tchen
<input checked="" type="checkbox"/> 5. Public Health	YES	12/09/14	tchen
<input checked="" type="checkbox"/> 6. Treasurer & Tax Collector	YES	12/03/14	tchen
<input checked="" type="checkbox"/> 7. Business License Commission			
<input type="checkbox"/> 8. Sheriff Department			
<input checked="" type="checkbox"/> 9. Regional Planning Commission	YES	11/12/14	tchen
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing	YES	03/10/16	tchen
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff Fingerprint	YES	11/12/14	tchen
<input type="checkbox"/> 14. Emergency Medical Services			

Conditions:



**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: THEATER-GENERAL

ADDRESS OF BUSINESS: 3822 CROSS CREEK RD, MALIBU, CA 90265

TELEPHONE: (310) 317-4531

OWNER OF BUSINESS: CHARLES L ROEMER

CAL. DR. LIC.#: [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: MALIBU TWIN CINEMAS

MAILING ADDRESS: [REDACTED]

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

BUILDING & SAFETY

MALIBU

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: _____

SIGNATURE: _____

DATE: 2/29/16

BASIC LICENSE NO. 3341

DATE 01/25/16

IDENTIFICATION NUMBER 141801

Nov-26-2014 09:49am

From-LACOFD FIRE MARSHAL

3238904055

T-211 P.011/013 F-933

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: THEATER-GENERAL

ADDRESS OF BUSINESS: 3822 CROSS CREEK RD, MALIBU, CA 90265

TELEPHONE: (310) 317-4531

OWNER OF BUSINESS: CHARLES L ROEMER

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: MALIBU TWIN CINEMAS

MAILING ADDRESS: [REDACTED]

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

FIRE DEPARTMENT

LA COUNTY

☒ APPROVAL

☐ DENIAL

RECOMMENDATION: _____

SIGNATURE: _____

DATE: 11-21-14

BASIC LICENSE NO. 3341

DATE 10/24/14

IDENTIFICATION NUMBER 141801

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: **THEATER-GENERAL**

ADDRESS OF BUSINESS: **3822 CROSS CREEK RD, MALIBU, CA 90265**

TELEPHONE: **(310) 317-4531**

OWNER OF BUSINESS: **CHARLES L ROEMER**

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **MALIBU TWIN CINEMAS**

MAILING ADDRESS: [REDACTED]

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

CHARLES ROEMER (GM) CELL# 626-676
8313

**TREASURER & TAX COLLECTOR
LA COUNTY**

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: _____

SIGNATURE: W S F

DATE: 12-1-14

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: **THEATER-GENERAL**

ADDRESS OF BUSINESS: **3822 CROSS CREEK RD, MALIBU, CA 90265**

TELEPHONE: **(310) 317-4531**

OWNER OF BUSINESS: **CHARLES L ROEMER**

CAL. DR. LIC.# [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **MALIBU TWIN CINEMAS**

MAILING ADDRESS [REDACTED]

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

Calabaras

**PUBLIC HEALTH
LA COUNTY**

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: _____

SIGNATURE: M. Orozco

DATE: 11/24/14

BASIC LICENSE NO. 3341

DATE 10/24/14

IDENTIFICATION NUMBER 141801

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: **THEATER-GENERAL**

ADDRESS OF BUSINESS: **3822 CROSS CREEK RD, MALIBU, CA 90265**

TELEPHONE: **(310) 317-4531**

OWNER OF BUSINESS: **CHARLES L ROEMER**

CAL. DR. LIC.#: **[REDACTED]**

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **MALIBU TWIN CINEMAS**

MAILING ADDRESS: **[REDACTED]**

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

REGIONAL PLANNING

MALIBU

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: _____

AKA 3822 Cross Creek Rd unit 3822

SIGNATURE: _____

DATE: _____

BASIC LICENSE NO. **3341**

DATE **10/24/14**

IDENTIFICATION NUMBER **141801**

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**914-01394
Rice

KIND OF BUSINESS: THEATER-GENERAL

ADDRESS OF BUSINESS: 3822 CROSS CREEK RD, MALIBU, CA 90265

TELEPHONE: (310) 317-4531

OWNER OF BUSINESS: CHARLES L ROEMER

CAL. DR. LIC.#: [REDACTED]

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: MALIBU TWIN CINEMAS

MAILING ADDRESS: [REDACTED]

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**SHERIFF FINGERPRINT
LA COUNTY**☒ APPROVAL☐ DENIALRECOMMENDATION: ApprovedSIGNATURE: [Signature]DATE: 11-12-14